



RECEIVED

JUL 30 2004

State of Washington  
Application for a Water Right

DEPT. OF ECOLOGY

For Ecology Use

Fee Paid 10.00

Date \_\_\_\_\_

Please follow the attached instructions to avoid unnecessary delays.

## Section 1. APPLICANT - PERSON, ORGANIZATION, OR WATER SYSTEM

Name BONNIE ACRES COMMUNITY ASSOCIATION Home Tel: (360) 293-9327  
Mailing Address 4316 GINNETT RD Work Tel: ( ) -  
City ANACORTES State WA Zip+4 98221+8581 FAX: (360) 293-5628

## Section 2. CONTACT - PERSON TO CALL ABOUT THE APPLICATION

☒ Same as above

Name RANDY WALTERS Home Tel: ( ) -  
Mailing Address \_\_\_\_\_ Work Tel: ( ) -  
City \_\_\_\_\_ State \_\_\_\_\_ Zip+4 \_\_\_\_\_ + \_\_\_\_\_ FAX: ( ) -  
Relationship to applicant ASSOCIATION PRESIDENT

## Section 3. STATEMENT OF INTENT

The applicant requests a permit to use not more than 11 (☒ gallons per minute or  
☐ cubic feet per second) from a ☐ surface water source or ☒ ground water source (check only one) for the purpose(s)  
of GROUP DOMESTIC SUPPLY. ATTACH A "LEGAL"

DESCRIPTION OF THE PLACE OF USE. (See instructions.) NOTE: A tax parcel number or a plat number is not  
sufficient. See original water rights certificate (attached)

Estimate a maximum annual quantity to be used in acre-feet per year: 8 (no additional water)

☐ Check if the water use is proposed for a short-term project. Indicate the period of time that the water will be needed:

From \_\_\_\_/\_\_\_\_/\_\_\_\_ to \_\_\_\_/\_\_\_\_/\_\_\_\_

## Section 4. WATER SOURCE

If SURFACE WATER	If GROUNDWATER
Name the water source and indicate if stream, spring, lake, etc. If unnamed, write "unnamed spring," "unnamed stream," etc.:	A permit is desired for <u>0</u> well(s).
Number of diversions: _____	<u>Existing well, in use for 30 years under water right G1-22228 (attached) will be used</u>
Source flows into (name of body of water):	Size & depth of well(s): <u>6" x 129'</u>



LOCATION								
Enter the north-south and east-west distances in feet from the point of diversion or withdrawal to the nearest section corner:								
¼ of	¼ of	Section	Township	Range(E/W)	County	If location of source is platted, complete below:		
						Lot	Block	Subdivision
NW	SW	14	34N	1E	SKAGIT			

For Ecology Use \_\_\_\_\_ Date Received: 7/30/04 Priority Date: 7/30/2004  
 SEPA: Exempt/Not Exempt FERC License # \_\_\_\_\_ Dept. Of Health # \_\_\_\_\_  
 Date Accepted As Complete 7/30/04 By XXX Date Returned \_\_\_\_\_ By \_\_\_\_\_ WRIA: 3

## Section 5. GENERAL WATER SYSTEM INFORMATION

- A. Name of system, if named: BONNIE ACRES
- B. Briefly describe your proposed water system. (See instructions.)  
The existing system would be used. we are only requesting 4 additional connections so that we can service all the lots in our water system.
- C. Do you already have any water rights or claims associated with this property or system? ☒ YES ☐ NO  
 PROVIDE DOCUMENTATION.

## Section 6. DOMESTIC / PUBLIC WATER SUPPLY SYSTEM INFORMATION (Completed for all domestic/public supply uses.)

- A. Number of "connections" requested: 12 total Type of connection Homes  
(4 more than current) (Homes, Apartment, Recreational, etc.)
- B. Are you within the area of an approved water system? ☒ YES ☐ NO  
 If yes, explain why you are unable to connect to the system. Note: Regional water systems are identified by your County Health Department. Insufficient connections; Bonnie Acres only has 8, although we applied for 12 in 1975.
- Complete C. and D. only if the proposed water system will have fifteen or more connections.**

- C. Do you have a current water system plan approved by the Washington State Department of Health? ☐ YES ☐ NO  
 If yes, when was it approved? \_\_\_\_\_ Please attach the current approved version of your plan.



- D. Do you have an approved conservation plan? ☐ YES ☐ NO  
If yes, when was it approved? \_\_\_\_\_ Please attach the current approved version of your plan.

## Section 7. IRRIGATION/AGRICULTURAL/FARM INFORMATION

(Complete for all irrigation and agriculture uses.)

- A. Total number of acres to be irrigated: \_\_\_\_\_
- B. List total number of acres for other specified agricultural uses:
- |           |             |
|-----------|-------------|
| Use _____ | Acres _____ |
| Use _____ | Acres _____ |
| Use _____ | Acres _____ |
- C. Total number of acres to be covered by this application: \_\_\_\_\_
- D. Family Farm Act (Initiative Measure Number 59, November 3, 1977, as amended by Chapter 237, Laws of 2001)  
Add up the acreage in which you have a controlling interest, including only:
- ‡ Acreage irrigated under water rights acquired after December 8, 1977;
  - ‡ Acreage proposed to be irrigated under this application;
  - ‡ Acreage proposed to be irrigated under other pending application(s).
1. Is the combined acreage greater than 6000 acres? ☐ YES ☐ NO
2. Do you have a controlling interest in a Family Farm Development Permit? ☐ YES ☐ NO  
If yes, enter permit no: \_\_\_\_\_
- E. Farm uses:
- Stockwater - Total # of animals \_\_\_\_\_ Animal type \_\_\_\_\_ (If dairy cattle, see below)
- Dairy - # Milking \_\_\_\_\_ # Non-milking \_\_\_\_\_

## Section 8. WATER STORAGE

Will you be using a dam, dike, or other structure to retain or store water? ☐ YES ☒ NO

NOTE: If you will be storing 10 acre-feet or more of water and/or if the water depth will be 10 feet or more at the deepest point, and some portion of the storage will be above grade, you must also apply for a reservoir permit. You can get a reservoir permit application from the Department of Ecology.

## Section 9. DRIVING DIRECTIONS

Provide detailed driving instructions to the project site.

I-5 North to Exit 230. Take HW 20 West to Fidalgo Island.  
Turn left at Sharpe's Corner toward Oak Harbor (continue on HW20). Turn right onto Campbell Lake Rd for 1.4 miles, then bear left up the hill (Sharpe Rd). After 1.9 miles, turn left onto Ginnett Rd. Well is at 4092 Ginnett.



## Section 10. REQUIRED MAP

- A. Attach a map of the project. (See instructions.)

## Section 11. PROPERTY OWNERSHIP

- A. Does the applicant own the land on which the water will be used? ☐ YES ☒ NO  
If no, explain the applicant's interest in the place of use and provide the name(s) and address(es) of the owner(s):

Applicant is a community water association; property owners are members of the association.

- B. Does the applicant own the land on which the water source is located? ☐ YES ☒ NO  
If no, submit a copy of agreement:

Applicant has an easement to the land on which the well is located.

I certify that the information above is true and accurate to the best of my knowledge. I understand that in order to process my application, I grant staff from the Department of Ecology access to the site for inspection and monitoring purposes. Even though I may have been assisted in the preparation of the above application by the employees of the Department of Ecology, all responsibility for the accuracy of the information rests with me.

Randy Walter  
Applicant (or authorized representative)

7/23/04  
Date

Landowner for place of use (if same as applicant, write "same")

Date



Use this page to continue your answers to any questions on the application. Please indicate section number before answer.

We are returning your application for the following reason(s):	
_____ Examination fee was not enclosed	APPLICANT PLEASE RETURN TO CASHIER, PO BOX 5128, LACEY, WA 98509-5128
_____ Section number(s) _____ is/are incomplete	APPLICANT PLEASE RETURN TO THE APPROPRIATE REGIONAL OFFICE
Explanation:  	
Please provide the additional information requested above and return your application by _____ _____ (date).	

Ecology staff \_\_\_\_\_

Date \_\_\_\_\_

Ecology is an Equal Opportunity and Affirmative Action employer.

To receive this document in alternative format, contact the Water Resources Program at (360) 407-6604 (Voice) or (360) 407-6006 (TDD).



SHADY  
GINNET RD.

14

+  
WELL

BONNIE  
ACRES

SECTION 14, TOWNSHIP 34N, RANGE 1E



10

